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DEC 14 2006

STATE OF SOUTH DAKOTA

S.D. SEC. OF STATE

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Corson/Sioux News-Messenger		2. DATE 9/27/06				
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$ \$28-33				
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 202 1st Ave. West, PO Box 788 McLaughlin, SD 57642						
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 202 1st Ave. West, PO Box 788 McLaughlin, SD 57642						
6. FULL NAME OF PUBLISHER: Merle E. Lofgren						
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) <table border="0"> <tr> <td style="text-align: center;">FULL NAME</td> <td style="text-align: center;">COMPLETE MAILING ADDRESS</td> </tr> <tr> <td>Merle E. Lofgren</td> <td>PO Box 788 McLaughlin, SD 57642</td> </tr> </table>			FULL NAME	COMPLETE MAILING ADDRESS	Merle E. Lofgren	PO Box 788 McLaughlin, SD 57642
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Merle E. Lofgren	PO Box 788 McLaughlin, SD 57642					
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) None						
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE				
A. TOTAL NO. COPIES (Net Press Run)	1375	1375				
B. PAID AND/OR REQUESTED CIRCULATION						
1. Sales through dealers and carriers, street vendors and counter sales.	295	290				
2. Mail Subscription (Paid and or requested)	928	922				
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1223	1212				
D. FREE DISTRIBUTION						
1. BY MAIL, CARRIER OR OTHER MEANS	15	15				
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	10	10				
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1248	1237				
F. COPIES NOT DISTRIBUTED						
1. Office use, left over, unaccounted, spoiled after printing	127	138				
2. Return from News Agents						
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	1375	1375				

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Merle E. Lofgren
(Signature)

Publisher
(Title)

State of South Dakota)

County of Corson)

(Seal)

Sworn to before me this 28 day of Sept, 2006

Sharon Hancock
Notary Public

My commission expires: 3-30-2009